

NOV 04 2005

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FACSIMILE COVER LETTER

To: Commissioner for Patents
Examiner Gushi, Ross N.

Firm: U.S. Patent and Trademark Office
Art Unit 2833

Facsimile: (571) 273-8300

From: Thomas F. Presson

Date: November 4, 2005

Re: FLH Ref No.: 450100-04947
Serial No: 10/510,724

Number of Pages: 10
(including cover page)

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00323049

PATENT
450100-04947IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Akira Kadonaga, et al.
 Serial No. : 10/510,724
 Filed : October 8, 2004
 For : ADAPTER DEVICE FOR ELECTRONIC EQUIPMENT
 Examiner : Gushi, Ross N.
 Art Unit : 2833

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745 Fifth Avenue
New York, NY 10151
Tel: 212-588-0800Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

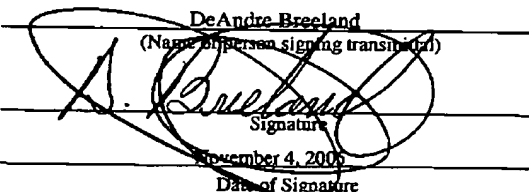
(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	6	Minus	** = 20	* 0 x	\$50 (25)	= \$ 0
Independent claims	1	Minus	*** = 3	* 0 x	\$200 (100)	= \$ 0
Total additional fee for this amendment						\$ 0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
 *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$300 (150) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the ____ month following the expiration of the term originally set therefor. This is a petition to request a ____ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$____ is attached, which covers the cost of ☐ additional claims x petition for extension of time.
- ☐ Charge \$____ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

CERTIFICATE OF FACSIMILE

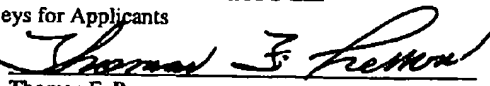
I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300 on November 4, 2005.

DeAndre Breeland
 (Name of person signing transmittal)

 Signature
 November 4, 2005
 Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicants

By:


 Thomas F. Presson
 Reg. No. 41,442

U.S. Patent Application No. 10/510,724
Reply to Office Action dated August 16, 2005

PATENT
450100-04947

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Akira Kadonaga, et al.
Serial No. : 10/510,724
For : ADAPTER DEVICE FOR ELECTRONIC
EQUIPMENT
Filed : October 8, 2004
Examiner : Gushi, Ross N.
Art Unit : 2833
Confirmation No. : 7336

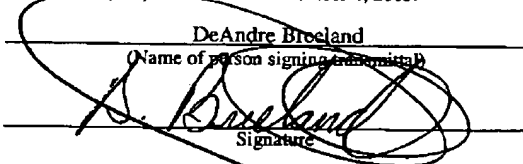
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DeAndre Breeland
(Name of person signing transmittal)

Signature
November 4, 2005
Date of Signature

AMENDMENT UNDER 37 C.F.R. § 1.121

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Non-Final Office Action dated August 16, 2005, having a three-month statutory period for response set to expire on November 16, 2005, please amend the above-identified application as follows.

U.S. Patent Application No. 10/510,724
Reply to Office Action dated August 16, 2005

PATENT
450100-04947

Amendments to the Claims are reflected in the listing of claims, which begins
on page 3 of this paper.

Remarks/Arguments begin on page 6 of this paper.